



TOWNSHIP OF GREENWICH COUNTY OF GLOUCESTER

420 Washington Street • Gibbstown, New Jersey 08027
Phone: 856-423-1038 • Fax: 856-423-2989

IN-FORECLOSURE, VACANT AND ABANDONED PROPERTY REGISTRATION FORM

As required pursuant to Township Ordinance 8-2022, Registration forms are required to be submitted within 10 days of the filing of the action of foreclosure to the Greenwich Township Clerk via regular mail at 420 Washington Street, Gibbstown, NJ 08027 and accompanied by the appropriate registration fee of \$500.00. If the property is vacant and abandoned at the time of the filing, or becomes vacant any time thereafter, the creditor shall pay an additional \$2,000.00 fee. Registration fees are due annually until such time that the foreclosure is discharged and/or the property is re-occupied. On each anniversary date of the initial registration, the creditor shall submit a renewal registration fee.

Property Location & Ownership Information:

Property Address _____ Block _____ Lot _____
Owner(s) Name _____ Owner(s) Phone # _____
Owner(s) Mailing Address _____ Email _____

Property Description / Additional Information:

Date property was acquired _____ Is the Property (check one) Vacant/Abandoned ____ Occupied ____
Has a foreclosure proceeding been initiated against this property? Yes ____ No ____
If yes, please provide filing date and docket number _____
Does owner intend to restore property to productive use and occupancy in the next 12 months? Yes ____ No ____
Is the property currently enclosed and/or secured from unauthorized entry? Yes ____ No ____
Are the utilities ON or OFF? Electric _____ Water _____ Gas _____
Have provisions been made to ensure appropriate maintenance of the grounds, landscape and exterior of the property? Yes ____ No ____

Authorized Agent: Creditor/Lender/Lien Holder/Mortgage Company/Trustee

Name _____
Address _____
Phone # _____ Email _____

Person Responsible for Maintaining & Securing Property: Must be located in the State of New Jersey and available 24 hours for emergencies

Name _____
Address _____
Phone # _____ Email _____

Owner/Authorized Agent Certification: I, the undersigned, hereby affirm that I am the owner or authorized agent designated to act on behalf of the owner for the above described property and that all information is true and correct to the best of my knowledge and behalf.

Signature _____ Date _____
Print Name _____

Office Use Only:

Registration Fee \$500 _____ Vacant and Abandoned Fee \$2,000 _____ Date Paid _____ Check Number _____